

Supplemental Application Data Sheet

Application Information

Application number:: 10/516,635
Filing Date:: 11/20/04
Application Type:: Regular
Subject Matter:: Utility
Suggested classification:
Suggested Group Art Unit:
CD-ROM or CD-R???:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: **METHODS OF DIAGNOSING & TREATING
DIABETES AND INSULIN RESISTANCE**
Attorney Docket Number:: **016325-013900US**
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 0
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Ireland
Status:: Full Capacity
Given Name:: Bernard
Middle Name::
Family Name:: Allan
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 940 Guerrero Street
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94110

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Belgium
Status:: Full Capacity
Given Name:: Francine
Middle Name::
Family Name:: Gregoire
Name Suffix::
City of Residence:: Lafayette
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1044 Carol Lane
City of Mailing Address:: Lafayette
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94549

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United Kingdom
Status:: Full Capacity
Given Name:: Brian
Middle Name::
Family Name:: Lavan
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2020 Lawton Street
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94122

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United Kingdom
Status:: Full Capacity
Given Name:: Shonna
Middle Name::
Family Name:: Moodie
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2091 Golden Gate
City of Mailing Address:: San Francisco

State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94115

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application PCT/US03/17725	National Stage of An Appln claiming benefit under 35 USC 119(e)	PCT/US03/17725 60/386,085	June 4, 2003 June 4, 2002
and PCT/US03/17725	An Appln claiming benefit under 35 USC 119(e)	60/386,331	June 5, 2002

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: METABOLEX, INC.
Street of mailing address:: 3876 Bay Center Place
City of mailing address:: Hayward
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94545